

Please print: Full Name

Conflict of Interest ELECTED OFFICIAL Statement of Financial Interest

RECEIVED

JAN 25 2024

SD Secretary of State

Deadline to file: Within 15 days after the person assumes office.

File with: The SECRETARY OF STATE except local candidates file with the office where they file their oath of office.

<u>Elected Officials who file:</u> State Office elected officials (governor, lieutenant governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands, state legislator, circuit court judge and supreme court justice <u>SDCL 3-1A-2</u>);

Gubernatorial Appointee for whom senate confirmation is required shall file with the secretary of state a statement of financial interest before confirmation SDCL 3-1A-3.

Local Office officials (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1st class municipality SDCL 3-1A-4)

Office (list District number i	fapplicable) Dbulding	Aumority
What is your occupation/pro	fession? retired	· · · · · · · · · · · · · · · · · · ·
		ancial Interest Statement check the box and
sign and date below.	NO Changes	
to your family's (includes sp includes any enterprise in wh	siness or economic relationship) which contrib- ouse, minor children living at home) gross inc nich you or an immediate family member(s) co come from each enterprise but do not include the	ome in the preceding calendar year. This also ntrols more than 10% of the capital or stock.
*The intent of this form is to	collect specific information, not generalities.	Do not put N/A or leave the grid blank.
Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
	Fil	ed this25 thday of
		January 2024
		Morae L. Johnson
		SECRETARY OF STATE
declare and affirm under the my knowledge and belief is a interests for the preceding cal	penalties of perjury that the information above true, correct and complete representation of mendar year. [1/23/(Date)]	e has been examined by me and to the best of yself and my immediate family's financial